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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Applic 1	Application or Docket Number		
APPLICATION AS FILED (Column 1)						- PART I (Column 2)		SMALL ENTITY		OR	OTHER SMALL		
· FOR			NUMBER FILED		NUM	NUMBER EXTRA		RATE (\$)	. FEE (\$)		RATE (\$)	FEE (\$)	
BASIC FEE (37 CFR 1.18(a), (b), or (c))							1						
SEARCH FEE (37 CFR 1.16(k), (i), or (m))							1						
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))					· -					•			
TOTAL CLAIMS (37 CFR 1.16(I))				minus 2				x 25=		OR	x50 =	į.	
INDEPENDENT CLAIMS (37 CFR 1.16(h))				minus 3			1	× /0V =		, viii	x 200 =		
(37 OFK 1.10(11))				cification	and drawings		1			<u>'</u>	^0,000		
FEE	CATION SIZE R 1.16(s))		sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See						•				
					(G) and 37 CF		j						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(J))								180			360		
* if the difference in column 1 is less than zero, enter *0* in column 2.								TOTAL	· .		TOTAL	·	
APPLICATION AS AMENDED - PART II													
(Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL I		
	118/20	RE	LAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PŘESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)	_	RATE (\$)	ADDI- TIONAL FEE (\$)	
	Total 37 CFR 1.16(1))	•	18.	Minus	" <u>20</u>	= /		x 25 =	/	OR.	x 50 =		
	ndependent 37 CFR 1.16(h))	•	5	Minus	"5	= /		× 100=		OR	x 200	· /	
¥ ^	Application Size Fee (37 CFR 1.16(s))]						
ויו	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							180		OR	360		
							•	TOTAL ADD'L FEE	<u> </u>	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)													
ENT T		REI	LAIMS MAINING AFTER NDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)	
	Total 37 CFR 1.16(i))	٠		Minus	** .	= .		x =		OR	x =		
END E	ndependent 37 CFR 1.16(h))	.* .		Minus	***	=	1	х =		OR	x =	·	
A AW	Application Size Fee (37 CFR 1.16(s))							· · · · ·					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		·	
·							-	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.													

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